



State of New Jersey
Department of Education
Office of GED Testing
PO Box 500
Trenton, NJ 08625-0500
www.state.nj.us/education/

1 PLEASE PRINT ALL INFORMATION							
Nam		First			MI		
Name at time of test if different from above:							
	(D)		<u> </u>				
Date	of Birth	Social	Security Nu	ımber			
Place	Place of Testing (City or School) Date of Testing						
Current Address (Street / PO Box # / Apt)							
City / State / Zip Code							
Daytime Phone Number Work Phone Number				Cell Phone Number			
Email Address:			Please initial to you.	Please initial below if you want your Transcript E-mailed			
			Initial here: _				
I authorize the New Jersey State Department of Education to release my GED transcript to the name(s) and							
address(es) on the reverse side of this form.							
Signature of Person Who Took The Test Sign X							
2	✓ Check As Man Transcripts –	y As Apply #	Qty	Please Allow 2	Weeks For P	rocessing	
	Diploma Verification Letter (see	e reverse side for explanation)	Qty				
	NEW JERSEY DOES NO	T ISSUE DUPLICATE DIF	PLOMAS				
Return this form to:							
NJ Department of Education							
Office of GED Testing PO Box 500							
Trenton, NJ 08625-0500							
3	Did you complete	·			Yes	No	
1	All appropriate information				100	110	
2		•					
3	Return address information and phone #						

Name (s) and address (es) to which GED information is to be mailed: Please print clearly (no abbreviation). The U.S. Post office vit not deliver without a complete address. Address #2 Address # 1 For additional mailing addresses please attach a separate piece of paper. **Corrections To Your Record** Name Correction From: To: Enclose the following □ required documentation Copy of legal document Copy of social security card Original diploma, if issued verifying correct name with this request: **Correction of Date of Birth** From: To: Enclose the following = Certified copy of your birth required documentation certificate must be with this request submitted with this request form **Correction of Social Security Number** To: Enclose the following = required documentation Copy of social security card with this request: NJ GED Testing is open to New Jersey residents only. NEW JERSEY DOES NOT ISSUE DUPLICATE DIPLOMAS

FYI

GED Transcript Request

An official GED transcript is a document certifying the highest scores earned on the Test of General Educational Development (GED). The transcript also verifies whether an individual has been issued a state high school diploma.

Diploma Verification

An official verification validating the issuance of a New Jersey Diploma through a method other than test of General Educational Development (GED).

Please Note: The Department of Education maintains GED records only for those individuals who tested at authorized GED Testing centers in NJ. The office does not maintain records for individuals who tested at federal correctional institutions; tested in another state or through the military (unless a prior request and payment have been accepted); or who graduated from a local school district high school or adult high school.

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